



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket No. (Optional) 30056/37692	
In re Application of Thomas H. Gilman			
Application Number 10/007,445-Conf. #3356		Filed November 5, 2001	
For: ABSORBENT FOAM WOUND DRESSING			
Art Unit 3761		Examiner Kim M. Lewis	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- | | | |
|--|----|--------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ | |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ | |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ | 950.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ | |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ | |

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-2855

I have enclosed a duplicate copy of this sheet.

- I am the
- ☐ applicant/inventor.
 - ☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
 - ☐ attorney or agent of record. Registration Number _____
 - ☒ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) 18,566

March 18, 2004
Date

(312) 474-6300
Telephone Number

Signature

John B. Lungmus
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

<input type="checkbox"/> Total of _____ forms are submitted.
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I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: March 18, 2004	Signature: (John B. Lungmus)